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Electronic Patent Application Submission

USPTO Use Only

EF S ID: 62858

Application ID: 10659570 

Title of Invention: INTEGRITY TESTABLE
AUTOCLAVABLE, STERILE
TRANSFER BAG

First Named Inventor: Martin Morrissey

Domestic/Foreign Application: Domestic Application

Filing Date: 2003-09-09

Effective Receipt Date: 2004-06-18

Submission Type: Information Disclosure
Statement

Filing Type:

Confirmation number: 5746

Attorney Docket Number: MCA-616 US

Total Fees Authorized: 180.0

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Deposit Account Number: 133577

Deposit Account Name: John Dana Hubbard

Access Code: ****

RAM Payment Status: RAM success

RAM User ID: EFSPROD

RAM Accounting Date: 2004-06-18

RAM Sequence Number: 29


Digital Certificate Holder: cn=John Dana Hubbard.,ou=Registered Attorneys,ou=Patent and
Trademark Office,ou=Department of Commerce,o=U.S. Government,c=US
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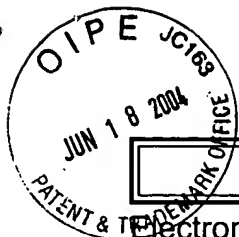
TRANSMITTAL

Electronic Version v1.1

Stylesheet Version v1.1.0

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<table border="1"><thead><tr><th>Submitted by:</th><th>Elec. Sign.</th><th>Sign. Capacity</th></tr></thead><tbody><tr><td>John Dana Hubbard Registered Number: 30,465</td><td>/JDHUBBARD/</td><td>Attorney</td></tr></tbody></table>			Submitted by:	Elec. Sign.	Sign. Capacity	John Dana Hubbard Registered Number: 30,465	/JDHUBBARD/	Attorney								
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Comments

**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0


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Application Number: 10/659570 											
Date: 2003-09-09											
First Named Applicant: Martin Morrissey											
Attorney Docket Number: MCA-616 US											
Art Unit: 1744											
Examiner: Not yet Assigned											
TOTAL FEE AUTHORIZED \$180											
Patent fees are subject to annual revisions on or about October 1st of each year.											
BASIC FILING FEE											
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Submission Of Information Disclosure Stmt Fee	1806	180	180
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Submission Of Information Disclosure Stmt Fee	1806	180	180								
AUTHORIZED BILLING INFORMATION											
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:											
Deposit account number: 133577											
Access Code *****											
Deposit name: Millipore Corporation											
Deposit authorized name: John Dana Hubbard											
Signature: /JDHUBBARD/											
Date (YYYYMMDD): 2004-06-18											
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.											



ELECTRONIC INFORMATION DISCLOSURE STATEMENT

Electronic Version v18

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